

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HC		1-34-02
O.I.P.E. CLASSIFIER	102		1150
FORMALITY REVIEW	TW	844	01 01 02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	9/29/02
2	2/20/02
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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